ENTRY BLANK	CAGE-	Por
PLEASE TYPE OR	PRINT	C
■ Ms. □ Mr. Artist	umpage, E	Barbara
	1 / /	(Last Name Last)
Permanent 4505 Address 4505	5 W. 227 St	· Fairview Pari
	reet	City
44126	Daytime Tel. (1777-1805
Zip	Area Code	
Temporary or Studio Address		
St	reet	City
	Daytime Tel. ()
Zip	Area Code	
	ently live in one of th in which county were	
Collaborator		
Collaborator	(If Any)	
If May Show entri	es are not accepted	or not sold:
Artist will pick	up at Museum.	
☐ Museum should	d dispose of.	
☐ Museum should	d ship to artist at arti	ist's expense
to this addre	ss:	
Special Instruction	ns	
		tions or a drawing of how

When necessary include below instructions or a drawing of how the object is to be assembled and displayed.

This Entry blank must be fully made out and signed. Unsigned Entry Blanks will not be accepted.

Note carefully calendar for delivery and return of objects. It is understood that the Museum will have the right to dispose for its own account any objects not called for by the dates listed.

It is also understood that accepted objects will remain on exhibition until June 29, 1986.

The submission of objects will be construed as an acceptance by the artist of all terms and conditions printed in the Entry Information.

Signature Barbara Humpsey

DO NOT DETACH